

**North Dakota Wing  
OUT-OF-STATE FLIGHT REQUEST  
(type or print)**

|  |  |            |                                 |        |
|--|--|------------|---------------------------------|--------|
| Pilots Name:      (Last)              (First)      (MI)  |  |            | Grade:                          | CAPID: |
| Pilots Address:              (Street)  |  |            | Charter Number:                 |        |
| (City)   |  | (State)    | (Zip + 4)                       |        |
| Home Phone:  |  |            | Work Phone:                     |        |
| Itinerary for out-of-state flight:   |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
| Proposed Departure Date:   |  |            | Destination:                    |        |
| Point of Departure:  |  |            | Estimated Time Enroute:         |        |
| Contact Phone at Destination:  |  |            | Proposed Return Date:           |        |
| Aircraft N Number:   |  | Type Acft: | Charter No where Acft Assigned: |        |
| Flight Release Officer Name:   |  |            | Flight Release Officer Phone:   |        |
| Name, CAPID of any Passengers: (Must be current CAP members, in uniform):  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
|  |  |            |                                 |        |
| <b><u>General Instructions</u></b>   |  |            |                                 |        |
| This form must be submitted to the Unit Commander or Flight Operations Officer at least ten (10) days in advance of your proposed out-of-state flight, and must be signed by the Wing Commander. You are required to have the signed form with you during your trip. Be sure to wear an appropriate CAP uniform at all times. Don't forget to file, use, and close a FAA or CAP flight plan, as appropriate, and check 121.5 after every flight. |  |            |                                 |        |
| <b>DATE</b>  | <b>TYPED NAME AND GRADE</b>                          |            | <b>SIGNATURE</b>                |        |
|  | Pilot:   |            |                                 |        |
|  | Unit Commander:                                      |            |                                 |        |
|  | Wing Commander (Required):                           |            |                                 |        |
|  | Region Commander (Required for Flights outside NCR): |            |                                 |        |